· · · · · · · · · · · · · · · · · · ·								Application or Docket Number						
	PATENT APPLICATION FEE DETERMINATION RECOI Effective October 1, 2000								09919779					
/0//3/85 (Column 1) (Column 2)								MALL E	NTITY	OR	OTHER			
TOTAL CLAIMS								RATE	FEE	1	RATE	FEE		
FOR			NUMBER	FILEO	NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS			24 minus 20=		• 4			X\$ 9=		OR	X\$18=	\$12		
INDEPENDENT CLAIMS			o mi	nus 3 =	33.			X40=		OR	X80=	240		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				1135=			OR	+270=	0.70		
* if the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	m		
M/10/ CLAIMS AS AMENDED - PART II									<u></u>		OTHER	THAN		
4	0/13/65	(Column 1)	(Column 2)			(Column 3)	4			OR	SMALL	ENTITY		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVX PAID	BER OUSLY	PRESENT EXTRA		RATE TION			RATE	ADDI- TIONAL FEE		
MON	Total	· 13	Minus	-2	4	=	lſ	X\$ 9=		OR	. X\$16-	··		
ME	Independent	. 4	Minus ***6			•		X40=		OR	X80=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=			+270=			
								TOTAL		9	TOTAL			
i	3/10/06	(Caluma 4)		(Colum	01	(Caluma O)	N	DOIT. FEE		OR,	NODIT. FEE			
	1. 10/	(Column 1)		(Colur	EST	(Column 3)	ľ		ADDI-	1	<u> </u>	4001		
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE		
2	Total	• 5	Minus	- 2	4			X\$ 9=		OR	X\$18=	•		
AME	Independent	· 2	Minus	*** (O AIM	-		X40=		OR	X80=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=	h j	OR	+270=			
TOTAL .										OR	TOTAL			
(Column 1) (Column 2) (Column 3)								JUII. PEE			CHAPT.			
	CLAIMS		HIGH		EST		1 _		ADDI-	1		ADDI-		
ENT (REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE		
AMENDMENT C	Total	•	Minus	••				X\$ 9=		OR'	X\$18=	·•		
	Independent	•	Minus	•••		•		X40=		OR	X80=			
L	FIRST PRESE	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135=												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										OR	+270=			
***	If the "Highest Nu	mber Previously P	aid For IN TH	S SPACE	is less the	an 3. enter "3."	~	DONT. FEE			ADDIT. FEE			
	The Tilghest Nur	ber Previously Pal	ld For" (Total o	r Independ	ent) is the	e highest numbe	r foun	d in the ap	propriate boi	in col	umn 1 j			

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